



Brentwood Recreation Department

1 Dalton Rd. Brentwood, NH 642-6400 ext. 20
recreation@brentwoodnh.gov

For Office Use Only

Paid _____

Cash Check _____

Date _____

Registration Form

2014 Baseball and Softball

Circle One: **T-Ball** (5 and 6 yr. -- 5yr. by 9/30/13)

U8 Softball (7yrs. by 1/1/14)

Farm League (7 yr. by 4/30/14)

U10 Softball (8yr. by 1/1/14)

AAA League (8 & 9 yr. by 4/30/14)

U12 Softball (12yr. or younger on 1/1/14)

U14 Softball (14yr. or younger on 1/1/14)

Little League, 13 yr. prep and Babe Ruth players need to register through Exeter Junior Baseball and Exeter Babe Ruth

Childs Name (Print) _____ Age _____ DOB _____ M / F

Address _____ Phone _____

Parents Name (Print) _____ Cell Phone _____

Email Address (please print clearly) _____

Emergency Contact _____ Relationship _____

Emergency Phone Number(s) _____

Doctor _____ Doctor's Phone _____

Medical Conditions and Medications _____

Allergies: _____

I, _____, individually as a parent or guardian of _____ do hereby give my consent to his/her participation in activities of Brentwood Youth Sports and further release the Brentwood Recreation Department, The Brentwood Recreation Commission, the Town of Brentwood and their agents from all claims, demands of chance on account of any and all injuries to persons or property that may result by virtue of said minor's participation in said activities.

To person herein described has permission to engage in all prescribed activities except as noted by me or my physician and so enclosed. I authorize an adult to consent to, in my absence, an X-Ray, examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care, to be rendered to the person herein, at a recognized medical facility under the general or special supervision of a licensed physician or surgeon.

I agree that in case of accident, emergency medical care may be given by ambulance rescue squad, coaches or other trained personnel. Whoever is transporting my child to and from games will not be held responsible for any injury sustained while in transit.

Parent/ Guardian Signature _____ Date _____

Volunteers Needed!

Coach _____ (certified? Yes / No) Asst. Coach _____

Sign-Up Fee:

Baseball: **T-Ball** \$30 **Farm** \$40 **AAA League** \$45

Girls Softball: **U8** \$50 **U10/ U12/ U14** \$70

(Families registering more than two children pay for only the two oldest players.

Additional children play at no charge.)

Please make checks payable to: **BRC**

Player Shirt Size (please circle)

Youth S M L

Adult S M L

Deadline for sign-up is February 25nd